

<b>PDR Administrative Results for New 2013 Indicators*</b> <b>February 1, 2013 - August 31, 2013</b>			
<b>Question</b>	<b>Total Number</b>	<b>Number Met w/TA</b>	<b>% Met TA</b>
The provider successfully completed APD's web-based course entitled Introduction to Social Security Work Incentives	412	334	81.1%
NEW The provider has written policies and procedures detailing hours/days of operation and the notification process to be used if the provider is unable to provide services for a specific time/day scheduled, including arrangement of a qualified backup provider.	839	572	68.2%
NEW The provider has written policies and procedures detailing how the provider will ensure compliance with background screening and five year rescreening.	842	573	68.1%
NEW If applicable, the provider has written policies and procedures related to the use of Reactive Strategies.	291	178	61.2%
The provider has completed 4 hours of annual in-service training for Life Skills Development 1.	692	412	59.5%
The provider completed eight hours of annual in-service training related to behavior modification for Residential Habilitation-Behavior Focus.	150	87	58.0%
NEW The provider has written policies and procedures detailing how the provider will ensure individual confidentiality and the maintaining and storage of records in a secure manner.	845	481	56.9%
Provider completed at least eight hours of supplemental training in general behavior analysis skills for annual recertification for Behavior Assistant.	53	29	54.7%
The provider has completed 4 hours of annual in-service training for Personal Supports.	1306	708	54.2%
Quarterly evidence of monthly supervision by the responsible Behavior Analyst is documented for Behavior Assistant.	55	27	49.1%
When applicable, the provider received training in an Agency approved curriculum for crisis management procedures consistent with the requirements of the Reactive Strategies rule (65G-8, FAC).	778	365	46.9%
The provider received training in HIV/AIDS/Infection Control.	634	222	35.0%
If provider operates Behavior Focus group homes, required on-site oversight for residential services is provided.	72	25	34.7%
The provider received training in CPR.	211	57	27.0%
The provider received training in First Aid.	2584	695	26.9%
The provider has completed at least 20 contact hours of face-to-face competency-based instruction with performance-based validation/re-certification for Residential Habilitation-Behavior Focus.	157	40	25.5%
The provider has completed at least 20 contact hours of face-to-face competency-based instruction with performance-based validation/re-certification for Residential Habilitation-Intensive Behavior.	17	4	23.5%

<b>PDR Administrative Results for New 2013 Indicators*</b> <b>February 1, 2013 - August 31, 2013</b>			
Question	Total Number	Number Met w/TA	% Met TA
The provider received mandatory Region/Area- specific training for Support Coordination.	425	4	0.9%
The provider received training in HIPAA.	2903	22	0.8%
If provider operates Intensive Behavior group homes the Program or Clinical Services Director meets the qualifications of a Level 1 Behavior Analyst.	15	0	0.0%

\* N size varies due to different policy requirements for solo and agency providers

Reasons for Met with TA by Indicator for New 2013 PDR Administrative Indicators February 1, 2013 - August 31, 2013			
Question	Reasons for Met with TA	Number	Percent
The provider received training in HIV/AIDS/Infection Control.	(New) Provider has received training in HIV/AIDS/Infection Control but not within the required 90 days of initially providing services.	5	2.3%
	Provider certification for HIV/AIDS/Infection Control training has expired.	12	5.5%
	Provider did not provide evidence of completion of training by a trainer certified by noted organizations.	45	20.5%
	Provider did not provide evidence of completion of training specific to HIV/AIDS/Infection Control.	157	71.7%
The provider received training in CPR.	(New For Behavior Analyst and Life Skills 2) Provider did not provide evidence of completion of training in CPR.	2	3.5%
	(New For Behavior Analyst and Life Skills 2) Provider has evidence of receiving training in CPR but not from a nationally recognized source.	4	7.0%
	(New For Behavior Analyst and Life Skills 2) Provider's certification for CPR training has expired.	2	3.5%
	(New) Provider has evidence of receiving training in CPR but not from a nationally recognized source.	2	3.5%
	(New) Provider has received CPR training but not within 90 days of initially providing services.	2	3.5%
	Provider did not provide evidence of completion of training in CPR.	28	49.1%
	Provider has evidence of receiving training in CPR but not from a nationally recognized source.	11	19.3%
	Provider's certification for CPR training has expired.	6	10.5%
The provider received training in First Aid.	Provider did not provide evidence of completion of training in First Aid.	536	77.0%
	Provider has evidence of receiving training in First Aid but not from a nationally recognized source.	108	15.5%
	Provider has received First Aid training but not within 90 days of initially providing services.	6	0.9%
	Provider's certification for First Aid training has expired.	42	6.0%
	There was a lapse in First Aid certification during the period under review.	4	0.6%

<b>Reasons for Met with TA by Indicator for New 2013 PDR Administrative Indicators</b> <b>February 1, 2013 - August 31, 2013</b>			
Question	Reasons for Met with TA	Number	Percent
When applicable, the provider received training in an Agency approved curriculum for crisis management procedures consistent with the requirements of the Reactive Strategies rule (65G-8, FAC).	Provider certificate of completion did not contain the date of the training.	1	0.3%
	Provider did not have proof of training in an Agency approved curriculum for crisis management procedures prior to working without another trained employee present.	6	1.6%
	Provider did not have proof of training in an Agency approved curriculum for crisis management procedures.	357	97.8%
	Provider received training in an Agency approved curriculum for crisis management procedures but not from an approved source.	1	0.3%
Provider completed at least eight hours of supplemental training in general behavior analysis skills for annual recertification for Behavior Assistant.	Provider completed some but not all of the 8 hours of annual continuing education training.	5	17.2%
	Provider did not have evidence of completing 8 hours of annual supplemental training.	24	82.8%
Quarterly evidence of monthly supervision by the responsible Behavior Analyst is documented for Behavior Assistant.	One hour/month of supervision was not documented in the record for one or more months covering services provided/billed during the period under review.	19	70.4%
	The time deemed appropriate by the LRC Chairperson was not present in the record for one or more months covering services provided/billed during the period under review.	1	3.7%
	Unable to determine due to absence of supporting documentation.	7	25.9%

Reasons for Met with TA by Indicator for New 2013 PDR Administrative Indicators February 1, 2013 - August 31, 2013			
Question	Reasons for Met with TA	Number	Percent
The provider has completed 4 hours of annual in-service training for Life Skills Development 1.	Certificate of completion did not include the date of course completion.	4	0.9%
	Certificate of completion did not include the duration of the course.	7	1.6%
	Certificate of completion did not include the name of the participant.	3	0.7%
	Certificate of completion did not include the name of the trainer and signature.	5	1.2%
	Certificate of completion did not include the title of the course.	4	0.9%
	Provider completed some but not all of the 4 hours of annual in-service training.	34	7.9%
	Provider did not have evidence of completing 4 hours of annual in-service training.	363	84.6%
	Some of the training provided was renewal of pre-service or other mandatory required basic training.	7	1.6%
	Some or all of the documented training was not job related.	2	0.5%
	The provider has completed 4 hours of annual in-service training for Personal Supports.	Certificate of completion did not include the date of completion.	30
Certificate of completion did not include the duration of the course.		31	3.7%
Certificate of completion did not include the name of the participant.		27	3.2%
Certificate of completion did not include the name of the trainer and signature.		29	3.4%
Certificate of completion did not include the title of the course.		29	3.4%
Some of the training provided was renewal of pre-service or other basic APD training.		8	0.9%
The documented training was not related to implementation of individually designed services.		3	0.4%
The provider completed some but not all required 4 hours of annual ongoing training.		53	6.3%
The provider did not provide evidence of completion of 4 hours of annual in-service training related to implementation of individually designed services.		637	75.2%

Reasons for Met with TA by Indicator for New 2013 PDR Administrative Indicators February 1, 2013 - August 31, 2013			
Question	Reasons for Met with TA	Number	Percent
The provider completed eight hours of annual in-service training related to behavior modification for Residential Habilitation-Behavior Focus.	Certificate of completion did not include duration of the course.	2	2.3%
	The provider completed some but not all required 8 hours of annual ongoing training related to behavior modification.	23	26.4%
	The provider did not provide evidence of completion of 8 hours of annual in-service training related to behavior modification.	62	71.3%
The provider has completed at least 20 contact hours of face-to-face competency-based instruction with performance-based validation/re-certification for Residential Habilitation-Behavior Focus.	Evidence of 20 contact hours of instruction in an APD approved curriculum was not present.	40	97.6%
	Evidence of 90 classroom hours of instruction in applied behavior analysis from non-university, non-college classes or university or college courses was not present.	1	2.4%
If provider operates Behavior Focus group homes, required on-site oversight for residential services is provided.	Evidence of required on-site oversight of residential services was available but not for the entire period of review.	3	12.0%
	Evidence of required on-site oversight of residential services was not provided.	22	88.0%
The provider has completed at least 20 contact hours of face-to-face competency-based instruction with performance-based validation/re-certification for Residential Habilitation-Intensive Behavior.	Evidence of 20 contact hours of instruction in an APD approved curriculum was not present.	4	100.0%

Reasons for Met with TA by Indicator for New 2013 PDR Administrative Indicators February 1, 2013 - August 31, 2013			
Question	Reasons for Met with TA	Number	Percent
The provider successfully completed APD's web-based course entitled Introduction to Social Security Work Incentives	The provider did not provide evidence of completion of APD's web-based course entitled Introduction to Social Security Work Incentives. within one year of receiving a certificate of enrollment	309	92.0%
	The provider did provide evidence of completion of APD's web-based course entitled Introduction to Social Security Work Incentives but it was not completed within one year of receiving a certificate of enrollment.	1	0.3%
	The provider did provide evidence of completion of APD's web-based course entitled Introduction to Social Security Work Incentives but it was not completed within one year of the handbook's effective date.	3	0.9%
	The provider did provide evidence of completion of training on an Introduction to Social Security Work Incentives but it was not APD's approved web-based course.	23	6.8%
NEW The provider has written policies and procedures detailing how the provider will ensure compliance with background screening and five year rescreening.	Provider did not have written policies and procedures detailing how the provider will ensure compliance with background screening and five year rescreening.	571	100.0%
NEW The provider has written policies and procedures detailing hours/days of operation and the notification process to be used if the provider is unable to provide services for a specific time/day scheduled, including arrangement of a qualified backup provider.	Provider did not have written policies and procedures detailing hours/days of operation and the notification process to be used if the provider is unable to provide services for a specific time/day scheduled, including arrangement of a qualified backup provider.	572	100.0%
NEW The provider has written policies and procedures detailing how the provider will ensure individual confidentiality and the maintaining and storage of records in a secure manner.	Provider did not have written policies and procedures detailing how provider will ensure individual confidentiality and the maintaining and storage of records in a secure manner.	478	100.0%

Reasons for Met with TA by Indicator for New 2013 PDR Administrative Indicators February 1, 2013 - August 31, 2013			
Question	Reasons for Met with TA	Number	Percent
NEW If applicable, the provider has written policies and procedures related to the use of Reactive Strategies.	The provider did not have written policies and procedures related to the use of Reactive Strategies.	161	82.6%
	The provider had written policies and procedures related to the use of Reactive Strategies but appropriate staff training was not addressed.	10	5.1%
	The provider had written policies and procedures related to the use of Reactive Strategies but data collection was not addressed.	4	2.1%
	The provider had written policies and procedures related to the use of Reactive Strategies but maintenance of reactive strategy consent information in client records was not addressed.	8	4.1%
	The provider had written policies and procedures related to the use of Reactive Strategies but record maintenance was not addressed.	5	2.6%
	The provider had written policies and procedures related to the use of Reactive Strategies but reporting and recording the use of any reactive strategy was not addressed.	3	1.5%
	The provider had written policies and procedures related to the use of Reactive Strategies but training in the provisions of this rule chapter was not addressed.	4	2.1%



<b>Results for New 2013 Indicators - Behavior Analysis</b> <b>February 1, 2013 - August 31, 2013</b> <b>N=118</b>			
Question	Total Number	Number Met w/TA	% Met TA
The provider has a method in place to gather information about the individual's physical, behavioral and emotional health on an ongoing basis.	117	39	33.3%
The provider assists the individual/legal representative to know about rights.	118	27	22.9%
New Behavior Analysis Service Plans meeting the requirements in 65G-4.010 are submitted for an initial review and approval (when indicated) by the LRC within 5 working days of implementation.	44	3	6.8%
A Quarterly Summary covering services provided and billed during the period under review is in the record.	117	7	6.0%
The provider maintains documentation of subsequent LRC reviews, recommendations and a review schedule for the Behavior Analysis Service Plan.	85	2	2.4%

Reasons for Met with TA by Indicator for New 2013 Indicators - Behavior Analysis			
February 1, 2013 - August 31, 2013			
Question	Reasons	Number	Percent
The provider assists the individual/legal representative to know about rights.	Provider documentation did not reflect evidence of assisting the individual/legal representative to know about rights as related to this service.	12	44.4%
	Provider was able to describe efforts to assist the individual/legal representative to know about rights as related to this service, but had not documented the information.	15	55.6%
The provider has a method in place to gather information about the individual's physical, behavioral and emotional health on an ongoing basis.	Key/Critical pieces of health and behavioral information were absent from the file.	4	10.3%
	Provider has no method in place to gather information about the individual's physical, behavioral and emotional health	4	10.3%
	The provider is knowledgeable of the individual's physical, behavioral and emotional health but documentation does not demonstrate provider's efforts to gather information for their records	31	79.5%

<b>Results for New 2013 Indicators - Behavior Assistant</b> <b>February 1, 2013 - August 31, 2013</b> <b>N=50</b>			
Question	Total Number	Number Met w/TA	% Met TA
The third Quarterly/Annual Report covering services provided and billed during the period under review is in the record.	43	16	37.2%
The provider collects data each month and sends to the Behavior Analyst.	50	17	34.0%
The provider has a method in place to gather information about the individual's physical, behavioral and emotional health on an ongoing basis.	50	10	20.0%
The provider assists the individual/legal representative to know about rights.	50	9	18.0%
Services are not rendered and billed in excess of 32 units of service per date.	42	7	16.7%
The provider has complete Daily Progress Notes for each date of service provided and billed during the period under review.	50	3	6.0%
The responsible Behavior Analysis Services Local Review Committee chairperson or Regional Behavior Analyst approves Behavior Assistant services.	50	3	6.0%

Reasons for Met with TA by Indicator for New 2013 Indicators - Behavior Assistant			
February 1, 2013 - August 31, 2013			
Question	Reasons	Number	Percent
The third Quarterly/Annual Report covering services provided and billed during the period under review is in the record.	Current third Quarterly/Annual Report covering services provided/billed during the period under review was not in the record. (R)	11	57.9%
	Third Quarterly/Annual Report covering services provided/billed during the period under review did not contain a summary of the first three quarters of the Support Plan year.	3	15.8%
	Third Quarterly/Annual Report covering services provided/billed during the period under review did not contain a summary of the recipient's progress toward achieving Support Plan goal(s).	3	15.8%
	Third Quarterly/Annual Report covering services provided/billed during the period under review was completed, but not 60 days prior to the Support Plan effective date.	2	10.5%
The provider collects data each month and sends to the Behavior Analyst.	Data was not present for one or more months covering services provided/billed during the period under review. (R)	8	44.4%
	There was no documentation available indicating data was sent to the Behavior Analyst one or more months covering services provided/billed during the period under review.	10	55.6%
The provider has a method in place to gather information about the individual's physical, behavioral and emotional health on an ongoing basis.	Provider has no method in place to gather information about the individual's physical, behavioral and emotional health	3	30.0%
	The provider is knowledgeable of the individual's physical, behavioral and emotional health but documentation does not demonstrate provider's efforts to gather information for their records	7	70.0%

<b>Results for New 2013 Indicators - CDC+ Consultant</b> <b>February 1, 2013 - August 31, 2013</b> <b>N=214</b>			
Question	Total Number	Number Met w/TA	% Met TA
Level of care is completed accurately using the correct instrument/form.	214	68	31.8%
The Support Plan is updated/revised when warranted by changes in the needs of the person receiving services.	117	8	6.8%
Support Plan reflects support and services necessary to address assessed risks.	205	14	6.8%
All applicable completed/signed Quick Updates are in the Record.	87	4	4.6%
Support Plan includes supports and services consistent with assessed needs.	211	7	3.3%
The Purchasing Plan reflects the goals/needs outlined in Participant's Support Plan.	214	5	2.3%
Services are delivered in accordance with the Cost Plan.	214	2	0.9%
If applicable, an approved Corrective Action Plan is being followed.	33	0	0.0%

Reasons for Met with TA by Indicator for New 2013 Indicators - CDC+ Consultant February 1, 2013 - August 31, 2013			
Question	Reasons	Number	Percent
Level of care is completed accurately using the correct instrument/form.	Handicapping Condition(s) checked were not consistent with the Psychological and/or Medical Record(s) in the record.	1	1.5%
	Option checked under section I was not consistent with the Psychological and/or Medical Record(s) in the record.	1	1.5%
	Option checked under section I was not consistent with the QSI in the record.	1	1.5%
	Unable to determine - Psychological and/or Medical Record(s) used to establish eligibility were not available in the Central Record.	65	95.6%

<b>Results for New 2013 Indicators - CDC+ Representative</b> <b>February 1, 2013 - August 31, 2013</b> <b>N=246</b>			
Question	Total Number	Number Met w/TA	% Met TA
Documentation is available to support the reconciliation of Monthly Statements.	241	81	33.6%
Monthly Statements are available for review.	243	39	16.0%
All applicable signed and approved Quick Updates are available for review.	89	12	13.5%
The Participant makes purchases that are consistent with the Purchasing Plan.	218	11	5.0%
The Participant obtains services consistent with stated/documented needs and goals.	243	11	4.5%

<b>Reasons for Met with TA by Indicator for New 2013 Indicators - CDC Representative</b> <b>February 1, 2013 - August 31, 2013</b>			
Question	Reasons	Number	Percent
Documentation is available to support the reconciliation of Monthly Statements.	There was documentation to support reconciliation had occurred for some months but not all.	24	30.0%
	There was no documentation showing reconciliation occurred.	56	70.0%



<b>Results for New 2013 Indicators - Life Skills Development</b> <b>February 1, 2013 - August 31, 2013</b>			
Question	Total Number	Number Met w/TA	% Met TA
Companion N=520			
The provider assists the individual/legal representative to know about rights.	519	98	18.9%
The provider has complete Service Logs covering services provided and billed during the period under review.	520	8	1.5%
SEC N=127			
The Employment Stability Plan/Implementation Plan is submitted to the individual and when applicable, the legal representative, within required time frames.	126	89	70.6%
The provider has a method in place to gather information about the individual's physical, behavioral and emotional health on an ongoing basis.	125	44	35.2%
The provider has justification to support individual remaining in job development status for more than two months.	38	5	13.2%
The provider has complete Service Logs covering services provided and billed during the period under review.	127	4	3.1%
ADT N=163			
The Implementation Plan is provided to the individual and when applicable, the legal representative, within required time frames.	163	69	42.3%
The provider maintains Daily Attendance Logs covering services provided and billed during the period under review.	163	5	3.1%
The provider assists the individual/legal representative to know about rights.	162	3	1.9%

Reasons for Met with TA by Indicator for New 2013 Indicators - Life Skills Development			
February 1, 2013 - August 31, 2013			
Question	Reasons	Number	Percent
SEC			
The Employment Stability Plan/Implementation Plan is submitted to the individual and when applicable, the legal representative, within required time frames.	Provider did not have documentation the Employment Stability Plan/Implementation Plan was provided to the individual.	81	89.0%
	Provider did not have documentation the Employment Stability Plan/Implementation Plan was provided to the legal representative.	6	6.6%
	Provider documentation indicates the Employment Stability Plan/Implementation Plan was provided to the individual but not per the 30 day timeframe.	3	3.3%
	Provider documentation indicates the Employment Stability Plan/Implementation Plan was provided to the legal representative but not per the 30 day timeframe.	1	1.1%
The provider has a method in place to gather information about the individual's physical, behavioral and emotional health on an ongoing basis.	Key/Critical pieces of health and behavioral information were absent from the file.	3	6.8%
	Provider has no method in place to gather information about the individual's physical, behavioral and emotional health	15	34.1%
	The provider is knowledgeable of the individual's physical, behavioral and emotional health but documentation does not demonstrate provider's efforts to gather information for their records	26	59.1%

Reasons for Met with TA by Indicator for New 2013 Indicators - Life Skills Development			
February 1, 2013 - August 31, 2013			
Question	Reasons	Number	Percent
ADT			
The Implementation Plan is provided to the individual and when applicable, the legal representative, within required time frames.	Provider did not have documentation the Implementation Plan was provided to the individual.	55	77.5%
	Provider did not have documentation the Implementation Plan was provided to the legal representative.	7	9.9%
	Provider documentation indicates the implementation plan was provided to the individual but not per the 30 day timeframe.	8	11.3%
	Provider documentation indicates the implementation plan was provided to the legal representative but not per the 30 day timeframe.	1	1.4%

<b>Results for New 2013 Indicators - Personal Supports</b> <b>February 1, 2013 - August 31, 2013</b> <b>N=1,131</b>			
Question	Total Number	Number Met w/TA	% Met TA
The provider has a method in place to gather information about the individual's physical, behavioral and emotional health on an ongoing basis.	1126	346	30.7%
The provider assists the individual/legal representative to know about rights.	1127	234	20.8%
The provider has complete Service Logs covering services provided and billed during the period under review.	1131	25	2.2%

Reasons for Met with TA by Indicator for New 2013 Indicators - Personal Supports February 1, 2013 - August 31, 2013			
Question	Reasons	Number	Percent
The provider assists the individual/legal representative to know about rights.	Provider documentation did not reflect evidence of assisting the individual/legal representative to know about rights.	96	41.4%
	Provider was able to describe efforts to assist the individual/legal representative to know about rights, but had not documented the information.	136	58.6%
The provider has a method in place to gather information about the individual's physical, behavioral and emotional health on an ongoing basis.	Key/Critical pieces of health and behavioral information were absent from the file.	32	9.1%
	Provider has no method in place to gather information about the individual's physical, behavioral and emotional health	94	26.6%
	The provider is knowledgeable of the individual's physical, behavioral and emotional health but documentation does not demonstrate provider's efforts to gather information for their records	227	64.3%

<b>Results for New 2013 Indicators - Residential Habilitation</b>			
<b>February 1, 2013 - August 31, 2013</b>			
<b>Question</b>	<b>Total Number</b>	<b>Number Met w/TA</b>	<b>% Met TA</b>
<b>Behavior Focus N=89</b>			
The Implementation Plan is provided to the individual and when applicable, the legal representative, within required time frames.	89	62	69.7%
The Behavior Focused rate has been approved annually by a board certified behavior analyst or designee.	89	38	42.7%
Training for caregivers on the Behavior Analysis Service Plan is documented.	88	18	20.5%
The provider assists the individual/legal representative to know about rights.	89	8	9.0%
The provider has a method in place to gather information about the individual's physical, behavioral and emotional health on an ongoing basis.	89	8	9.0%
The provider maintains Daily Attendance Logs covering services provided and billed during the period under review.	89	5	5.6%
When applicable, the provider maintains documentation of LRC reviews, recommendations and a review schedule for the Behavior Analysis Service Plan.	79	4	5.1%
<b>Intensive Behavioral N=21</b>			
The Implementation Plan is provided to the individual and when applicable, the legal representative, within required time frames.	21	9	42.9%
The Intensive Behavior rate has been approved annually by a board certified behavior analyst or designee.	21	8	38.1%
Training for caregivers on the Behavior Analysis Service Plan is documented	21	3	14.3%
The provider has a method in place to gather information about the individual's physical, behavioral and emotional health on an ongoing basis.	21	2	9.5%
The provider assists the individual/legal representative to know about rights.	21	1	4.8%
The provider maintains Daily Attendance Logs covering services provided and billed during the period under review.	21	0	0.0%
When applicable, the provider maintains documentation of LRC reviews, recommendations and a review schedule for the Behavior Analysis Service Plan.	20	0	0.0%
<b>Standard N=531</b>			
The Implementation Plan is provided to the individual and when applicable, the legal representative, within required time frames.	531	329	62.0%
The provider has a method in place to gather information about the individual's physical, behavioral and emotional health on an ongoing basis.	531	76	14.3%
The provider assists the individual/legal representative to know about rights.	531	59	11.1%
The provider maintains Daily Attendance Logs covering services provided and billed during the period under review.	531	10	1.9%

Reasons for Met with TA by Indicator for New 2013 Indicators - Residential Habilitation			
February 1, 2013 - August 31, 2013			
Question	Reasons	Number	Percent
<b>Behavior Focus</b>			
The Implementation Plan is provided to the individual and when applicable, the legal representative, within required time frames.	Provider did not have documentation the Implementation Plan was provided to the individual.	59	85.5%
	Provider did not have documentation the Implementation Plan was provided to the legal representative.	9	13.0%
	Provider documentation indicates the Implementation Plan was provided to the individual but not per the 30 day timeframe.	1	1.4%
The Behavior Focused rate has been approved annually by a board certified behavior analyst or designee.	Record did not contain a "Recommendation of Eligibility for Behavioral Services" form. (R)	33	86.8%
	"Recommendation of Eligibility for Behavioral Services" form did not cover the entire period under review. (R)	4	10.5%
	"Recommendation of Eligibility for Behavioral Services" form was not approved by a board certified behavior analyst level one or two or APD designee. (R)	1	2.6%
Training for caregivers on the Behavior Analysis Service Plan is documented.	Documentation did not reflect training for caregivers on the Behavior Analysis Service Plan.	18	100.0%
<b>Intensive Behavioral</b>			
The Implementation Plan is provided to the individual and when applicable, the legal representative, within required time frames.	Provider did not have documentation the Implementation Plan was provided to the individual.	8	88.9%
	Provider did not have documentation the Implementation Plan was provided to the legal representative.	1	11.1%
The Intensive Behavior rate has been approved annually by a board certified behavior analyst or designee.	Record did not contain a "Recommendation of Eligibility for Behavioral Services" form. (R)	6	75.0%
	"Recommendation of Eligibility for Behavioral Services" form did not cover the entire period under review. (R)	2	25.0%

Reasons for Met with TA by Indicator for New 2013 Indicators - Residential Habilitation			
February 1, 2013 - August 31, 2013			
Question	Reasons	Number	Percent
Standard			
The Implementation Plan is provided to the individual and when applicable, the legal representative, within required time frames.	Provider did not have documentation the Implementation Plan was provided to the individual.	305	87.9%
	Provider did not have documentation the Implementation Plan was provided to the legal representative.	38	11.0%
	Provider documentation indicates the Implementation Plan was provided to the individual but not per the 30 day timeframe.	3	0.9%
	Provider documentation indicates the Implementation Plan was provided to the legal representative but not per the 30 day timeframe.	1	0.3%



<b>Results for New 2013 Indicators - Support Coordination</b> <b>February 1, 2013 - August 31, 2013</b> <b>N=1,325</b>			
Question	Total Number	Number Met w/TA	% Met TA
Level of care is completed accurately using the correct instrument/form.	1321	476	36.0%
The Support Plan is updated/revised when warranted by changes in the needs of the person receiving services.	788	74	9.4%
Support Plan includes supports and services consistent with assessed needs.	1317	101	7.7%
Support Plan reflects support and services necessary to address assessed risks.	1287	114	8.9%
Services are delivered in accordance with the Cost Plan, including type, scope, amount, duration, and frequency specified in the Cost Plan.	1323	29	2.2%
Progress Notes reflect required monthly contact/activities and are in the record.	1325	1	0.1%

Reasons for Met with TA by Indicator for New 2013 Indicators - Support Coordination			
February 1, 2013 - August 31, 2013			
Question	Reasons	Number	Percent
Level of care is completed accurately using the correct instrument/form.	Complete Medicaid Waiver Eligibility Worksheet was not in the record.	7	1.5%
	Handicapping Condition(s) checked were not consistent with the Psychological and/or Medical Record(s) in the record.	10	2.1%
	Handicapping Condition(s) checked were not consistent with the QSI report in the record.	4	0.8%
	Incorrect or out of date Medicaid Waiver Eligibility Worksheet was in the record.	16	3.3%
	Major Life Activities checked were not consistent with the Psychological and/or Medical Record(s) in the record.	1	0.2%
	Major Life Activities checked were not consistent with the QSI report in the record.	1	0.2%
	Option checked under section I was not consistent with the Psychological and/or Medical Record(s) in the record.	16	3.3%
	Option checked under section I was not consistent with the QSI in the record.	2	0.4%
	Unable to determine - Psychological and/or Medical Record(s) used to establish eligibility were not available in the Central Record.	423	88.1%

<b>Results for New 2013 Indicators - Supported Living Coaching</b> <b>February 1, 2013 - August 31, 2013</b> <b>N=310</b>			
Question	Total Number	Number Met w/TA	% Met TA
The Implementation Plan is provided to the individual and when applicable, the legal representative, within required time frames.	307	191	62.2%
If the individual is receiving Personal Supports and Supported Living Coaching, there is evidence of coordination between the services.	235	70	29.8%
The provider has complete Daily Progress Notes for each date of service provided and billed during the period under review.	310	4	1.3%

Reasons for Met with TA by Indicator for New 2013 Indicators - Supported Living Coaching			
February 1, 2013 - August 31, 2013			
Question	Reasons	Number	Percent
The Implementation Plan is provided to the individual and when applicable, the legal representative, within required time frames.	Provider did not have documentation the Implementation Plan was provided to the individual.	187	97.4%
	Provider did not have documentation the Implementation Plan was provided to the legal representative.	3	1.6%
	Provider documentation indicates the Implementation Plan was provided to the individual but not per the 30 day timeframe.	1	0.5%
	Provider documentation indicates the Implementation Plan was provided to the legal representative but not per the 30 day timeframe.	1	0.5%
If the individual is receiving Personal Supports and Supported Living Coaching, there is evidence of coordination between the services.	Documentation did not indicate coordination between the Supported Living Coach and the Personal Supports provider.	51	70.8%
	Unable to determine due to absence of supporting documentation.	21	29.2%